SYNOPSIS

PhD in Women's Studies

Assessment of Premenstrual Symptoms among College Faculties - A Psychosocial Perspective

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1. Introduction

In today's fast-paced world, humans in general strive to support their basic needs as well as their families' needs. Life on the whole has become stressful due to numerous factors such as handling everyday situations at home, dealing with workplace hassles and meeting work targets, increasing population and diminishing resources, financial stress, media distraction, comparison with others and setting unreasonable standards for oneself, etc. Apart from these general life stressors, women undergo physical and emotional stress as part of their biological process during menstrual cycle. Though, this is an element of nature's reproductive activity, the difficulty and pain one undergoes during this physical change combined with mood fluctuations, socio-cultural beliefs and one's own perception and ability to handle it makes this process exhaustive. In India female faculties constitute 42.9% according to the All-India Survey on Higher Education in 2020-2021 released by Press Information Bureau, Ministry of Education. A study conducted on women professionals serving at higher educational institutions reveal that they feel the pressure and difficulty in coping up with dual roles as career women and as homemakers and caregivers. The study also mentions that handling the dual roles leads to various health issues, stress and they are worried about their well-being. Overall, the study indicates training on issues related to management at home as well as workplace and need for supportive policies for women (Purnima et al., 2022). In this context, emotional wellness and stress plays a crucial role, which has more impact in case of women who suffers from premenstrual symptoms. The reason being, during luteal phase this stress gets aggravated and creates discomfort, which in turn affect their individual (self) as well as workplace behaviours causing work-life imbalances. In this context, emotional wellness is very much indispensable to balance their work-life. In the current scenario, college faculties are under a lot of stress due to demanding family and social responsibilities, work-related issues including career growth and employment based on work experience and categorized into temporary, contractual, or permanent status resulting in financial burden and emotional discomfort. This necessitates the research study to focus on identifying and understanding various aspects, causal factors, attributes, and behavioural patterns of working women in the academic sector

that are indispensable for handling the premenstrual symptoms effectively so as to maintain their work-life balance.

Emotional wellness is a state of awareness by understanding life's challenges through acceptance of one's emotions and the ability to manage it effectively in a healthy and positive way. Nowadays, women are posed with demanding situations both at workplace and at home and their contribution to socio-economic development is crucial. Several research studies have indicated that stressful life situations, lifestyle changes, socio-economic conditions, psychological and medical aspects, hormonal fluctuations amongst others act as contributors to women's physical, mental and reproductive health. The stressors induced by day-to-day life's situations can cause or aggravate mental health conditions resulting in imbalanced emotions and disruption in functioning of daily activities.

Stress affects the body's normal functioning capacity including the cardiovascular, respiratory, gastrointestinal, endocrine, musculoskeletal, and reproductive systems. It can also have a significant impact on emotional variations, behavioural changes and thinking ability. Scientific research has proved the existence of mind-body connection and emotions play a significant role in biological changes. A study conducted earlier has provided evidence for neural basis of mind-body connection and that stress and other mental states can affect organ's functioning leading to psychosomatic illnesses (Dum et al., 2016). Since women in the academic sector are the pillars for imparting knowledge, they need to be more focused without physical or emotional imbalances in order to deliver quality education to younger generations. Numerous research studies have found that stress is also associated with variations in the menstrual cycle and aggravation of premenstrual symptoms. The findings of a study conducted by Singh et al. (2015) showed that psychosocial stress may be responsible for irregular menstrual cycles and women under psychosocial stress are prone to long-term disease risks. Also, daily stressors are linked to alteration in the reproductive function in healthy women who are without any reproductive disorders (Schliep et al., 2015). These symptoms significantly affect the mood causing emotional discomfort, which hinders the daily functioning of women including disruptive relationships, imbalanced personal and professional activities and finally adversely impacting the quality of life.

Women are posed with innumerable challenges every day to balance their personal and professional life. Apart from these day-to-day stressful events, women also experience both

physical and emotional stress during their monthly menstrual cycle. However, the changes that occur a week to ten days before the onset of menses, i.e., during the premenstrual phase or luteal phase of the menstrual cycle are referred to as premenstrual symptoms. These symptoms involves both physical and psychological symptoms that hinders the daily functioning of women including their work, personal activities and relationships. It also adversely impacts quality of life especially during the premenstrual phase (Dennerstein et al., 2010, Quick et al., 2019 & Hofmeister & Bodden, 2016). A research study indicated that premenstrual symptoms could lead to a variety of physical consequences, psychological conditions, behavioural changes and social complications (Siahbazi et al., 2018). It has been reported that approximately 80% of women stated that they experience at least one mood or physical symptom premenstrually and 38% of them are unable to perform their daily activities (Lustyk & Gerrish, 2010). In addition to this, a large study conducted over 3500 women reported the prevalence of moderate to severe premenstrual mood symptoms in middle-aged women are slightly more than younger or older groups (Tschudin et al., 2010). The common symptoms that working women experience during the premenstrual phase are difficulty in concentration, self-doubt, fatigue, tearfulness, outburst, increase in sensitivity to people as well as environment, difficulty in social interaction (Hardy & Hardie, 2017). In another large international sample, majority of women reported premenstrual food cravings, mood changes, and fatigue every menstrual cycle. Mood symptoms did not vary by age group, suggesting that premenstrual mood changes are a persistent issue among women of reproductive age (Hantsoo et al., 2022).

Psychologically, women with PMS exhibit a lot of emotional discomforts, wherein the PMS symptoms were significantly related to depression, anxiety, and stress. Severe premenstrual disorder results in economic burden for both women and the society. The interventions towards psychological symptom management and work may be of benefit as impaired work outcomes not only impact the women individually, but also have wider implications (EL-Hamid et al., 2013, Hammam et al., 2017). This is quite appropriate in the case of Indian women employees who take their family commitments very seriously when compared to their professional responsibilities, which results in developing severe stress and work-family conflict (Somashekher, 2018). Also, a study conducted by Hardy & Hunter (2021) mentioned that employees with moderate to severe PMS were found to perceive that their symptoms were preventing their ability to carry out the job requirements and was associated with difficulty

concentrating at work, reduced work productivity, increased work absenteeism and significant impact on quality of life.

A research study investigated the differences in neurophysiological reactivity and emotional state to stressors, wherein it revealed that women with PMS experience more negative affect and less positive affect after being exposed to stressful conditions. Surprisingly, these effects were independent of the menstrual cycle, hence continuous and permanent changes have occurred in women with PMS (Liu et al., 2017). Another study states that PMS is associated with alterations in emotion regulation both at explicit and implicit levels and should focus more on cognitive-emotional approach and its relation to biological changes (Eggert et al., 2016). Moreover, many studies have investigated the effect menstrual cycle has on dreams, sleep quality and mood. During the pre-ovulatory phase had the highest levels of incongruity with positive emotions and during the premenstrual phase dreams were longer with larger number of female characters and negative emotions. The results suggested that hormonal variations during the menstrual cycle may have an effect on dreaming. Also, the hormonal variations during the luteal phase may influence dream content (Natale et al., 2010, Ilias et al., 2019). In the context of emotion regulation, dreams can effectively regulate emotions by linking potential dangers with novel, non-fearful dream contexts and can lead to a reduction in feelings of anxiety and other negative emotions as a form of emotional release or catharsis (Samson et al., 2023).

When it comes to treatment for PMS, there are over 150 documented symptoms and wide variability in its prevalence, expression, and impact, hence there is no one single treatment. It is suggested that approaches by self-help and self-awareness along with other mind-based interventions may help the affected women to overcome these symptoms so that they may increase their work productivity and quality of life (Jahromi et al., 2011). Also, mindfulness-based cognitive therapy improved symptoms such as anxiety and depression in women with PMS and suggests that in addition to medical therapy, psychotherapy may be useful for women with mild to moderate symptoms (Panahi & Faramarzi, 2016). PMS management is done by integrative approach based on the individual such as creating awareness, self-screening, lifestyle and diet modifications, stress coping strategies, pharmacological and other alternative therapies (Abay & Kaplan, 2019).

Mental Health is reported as a crucial component in studies involving Quality of Life and Work-Life Balance. A recent systemic review and meta-analysis conducted in India and Turkey reported that PMS was prevalent in 43–52.2% women of reproductive age (Erbil & Yücesoy, 2021; Dutta & Sharma, 2021). PMS gains importance in the case of women in academia, wherein they are the pillars for seeding and infusing knowledge to younger generations; therefore, emotional balance is vital to their overall well-being to deliver quality education. Hence, there is a sheer necessity to conduct a research study on women faculties in the academic sector and to provide a comprehensive framework along with possible approach to suggest plausible assessment measure to alleviate premenstrual symptoms and enhance their work-life balance.

2. Problem Definition

The premenstrual symptoms have a significant impact on mental health and overall well-being of woman. Assessment of these symptoms among college faculties from a psychosocial perspective is vital as they need to perform multiple and complex roles to address the educational needs of today's students at the workplace and balance their personal life.

3. Objectives

To assess the thought, feeling and behavioural levels associated with recurrent emotional disturbances in accordance with symptoms during luteal phase of the menstrual cycle

To identify, compare and analyze the relationships and contributors that are associated with socio-demographic variables, general emotional aspects and work-life perceptions

To provide insights on unresolved issues of the mind through in-depth assessment and facilitate restructuring patterns

To explore possible measures for women to alleviate their emotional disturbances through self-rehabilitation avenues

4. Scope of Research

The present research study will provide a platform for women workforces to overcome the stress with regard to their biological aspects like premenstrual symptoms and enables the understanding of self so as to handle them effectively at different situations.

5. Methodology

5.1 Research Design and Method

The researcher has administered exploratory research design and survey research method to assess premenstrual symptoms among college faculties and achieve objectives of this research study.

5.2 Sampling Procedure

The sampling has been done through five arts and science colleges consisting of both self-financing and aided departments in the Coimbatore City. Convenient sampling technique was administered across the finite universe of 639 and 243 respondents. Faculties under the age group of 25 - 50 years were included. The researcher excluded faculties above 50 years, who have had hysterectomy or attained early menopause and staff under non-teaching category.

5.3 Data Collection and Tools

An online questionnaire consisting of 45 variables (socio-demographic, health, premenstrual, psychosocial and premenstrual symptom remedial variables) was created using Google Forms. A letter of approval was received from the head of the institution of 5 colleges. The confidentiality statement and non-disclosure of the collected data were informed to the participants in the online link. The online questionnaire link was circulated through the respective college coordinator and head of the departments via college email ID and WhatsApp group. Upon receiving the responses in the google form, the respective respondent was contacted to fix an appointment to obtain dream content. A telephonic interview was then scheduled and the dream content was recorded with an average of about 15 to 20 minutes per respondent. Content analysis was performed with the recorded dreams and its association with negative emotions and stress was analyzed.

5.4 Pilot Study

A pilot study had been conducted covering 62 respondents from two colleges, which provided a clear understanding of the study and to modify and strengthen the questionnaire. A total of 8 self-devised scales were administered in the questionnaire and it showed reliability co-efficient for Emotional Discomfort (ED) as 0.928, Thoughts, Feelings and Behavioral Pattern (TFB) as 0.814, General Dream Patterns as 0.800, Causes for Stress (CFS) as 0.845, Viewpoint of Work and Life (VWAL) as 0.723, Food Habits (FH) as 0.602, Workplace Behavioural Aspects (WBA) as 0.580 and Restructuring Patterns (RP) as 0.716. The pilot study also facilitated to identify ambiguous questions and eliminate them.

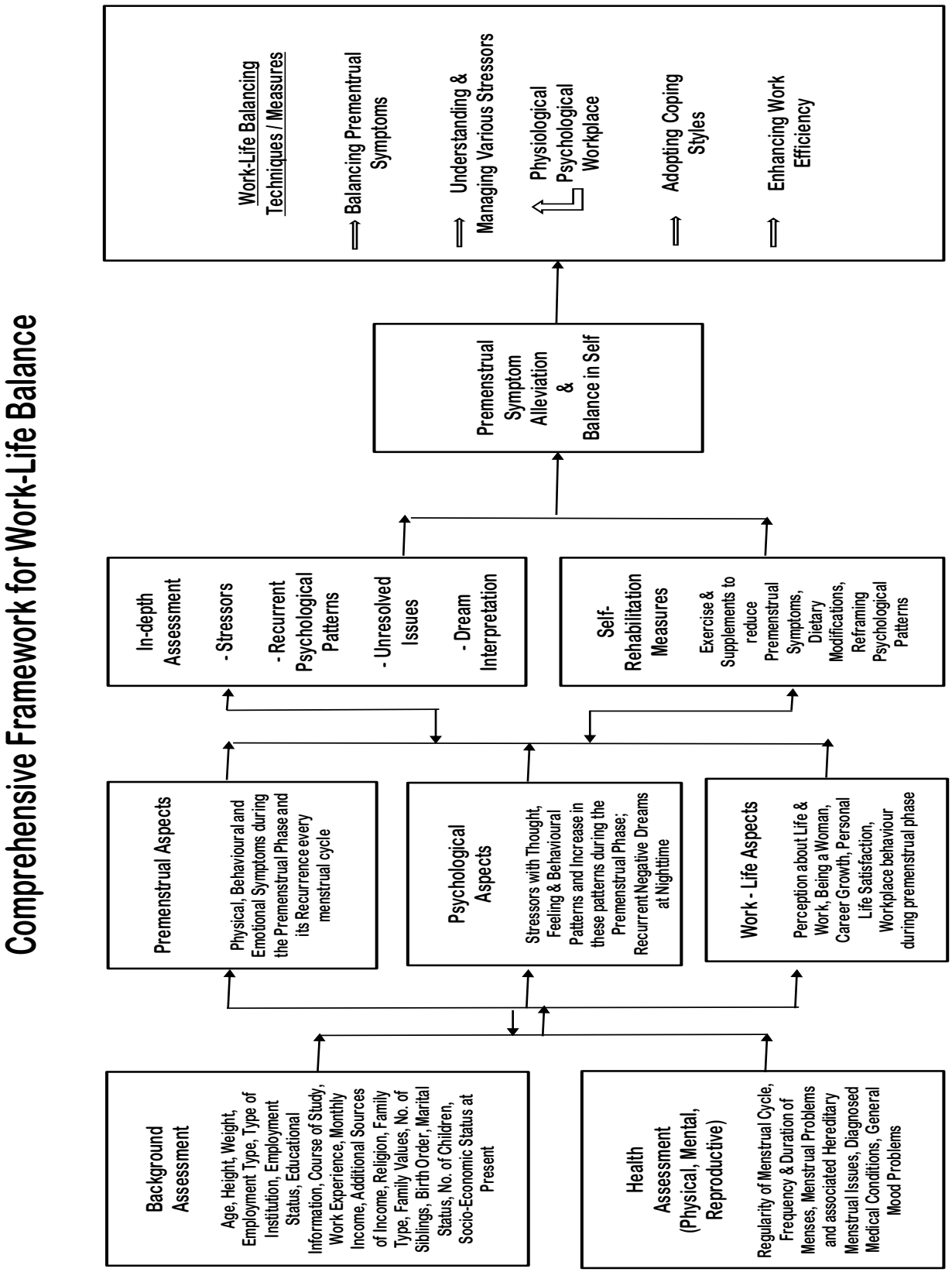
The questionnaire was validated by a statistician, psychologist, gynaecologist and a medical head.

6. Original Contributions

6.1 Comprehensive Framework for Work-Life Balance

The comprehensive framework has been proposed based on the pertinent data that are responded in the premenstrual symptom context by women serving as faculties at selective colleges taken for the research study. The framework contains various facets to understand the respondents in a better way. It comprises of background assessment, health assessment for understanding the premenstrual aspects, psychological aspects, work-life aspects thereby conducting in-depth assessment focusing on stressors, recurrent psychological patterns, unresolved issues and dream interpretation thereby suggesting self-rehabilitation measures, which needs to be introspected by respondents' themselves to alleviate the symptoms and balance the 'self' during the luteal phase. This in turn improve the work-life balance by adopting self-assessment measures, which includes balancing the premenstrual symptoms, understanding & managing various stressors including physiological, psychological and workplace stress, and adopting coping styles during the premenstrual phase.

Fig.1 Comprehensive Framework for Work-Life Balance


Comprehensive Framework for Work-Life Balance
Work-Life Balancing Techniques / Measures
Balancing Premenstrual Symptoms
Understanding & Managing Various Stressors
Physiological
Psychological
Workplace
Adopting Coping Styles
Enhancing Work Efficiency
Premenstrual Symptom Alleviation & Balance in Self
In-depth Assessment
- Stressors
- Recurrent Psychological Patterns
- Unresolved Issues
- Dream Interpretation
Self-Rehabilitation Measures
Exercise & Supplements to reduce Premenstrual Symptoms, Dietary Modifications, Reframing Psychological Patterns
Premenstrual Aspects
Physical, Behavioural and Emotional Symptoms during the Premenstrual Phase and its Recurrence every menstrual cycle
Psychological Aspects
Stressors with Thought, Feeling & Behavioural Patterns and Increase in these patterns during the Premenstrual Phase; Recurrent Negative Dreams at Nighttime
Work - Life Aspects
Perception about Life & Work, Being a Woman, Career Growth, Personal Life Satisfaction, Workplace behaviour during premenstrual phase
Background Assessment
Age, Height, Weight, Employment Type, Type of Institution, Employment Status, Educational Information, Course of Study, Work Experience, Monthly Income, Additional Sources of Income, Religion, Family Type, Family Values, No. of Siblings, Birth Order, Marital Status, No. of Children, Socio-Economic Status at Present
Health Assessment (Physical, Mental, Reproductive)
Regularity of Menstrual Cycle, Frequency & Duration of Menses, Menstrual Problems and associated Hereditary Menstrual Issues, Diagnosed Medical Conditions, General Mood Problems

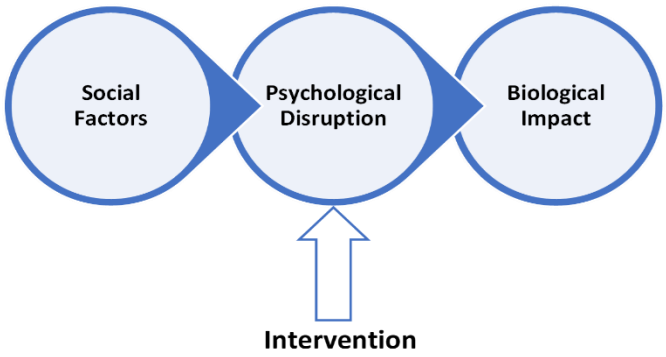
The comprehensive framework in Fig. 1 by itself is the gateway for future researchers, policy makers, practitioners / therapists, and counsellors into dealing PMS to have a clear-cut understanding of its vital aspects and inseparable factors that needs to be taken care of for providing appropriate facilitation to working women especially serving at educational institutions.

6.2 Biopsychosocial Approach for Alleviation of Premenstrual Symptoms

The present study revealed that premenstrual symptom remedial variables such as medicines/supplements and exercises can be effective to reduce the no. of menstrual symptoms and other diagnosed conditions; however, increase in negative psychological patterns during the premenstrual phase is highly correlated with induced stress and diminished exercise. Hence, a more psychological approach is required to reduce the stress thereby decreasing the severity of premenstrual symptoms.

Based on the findings from the current study and other supportive earlier research studies, the following biopsychosocial approach is proposed to alleviate the premenstrual symptoms and enhance the quality of life.

Fig.2 Biopsychosocial Approach for Alleviation of Premenstrual Symptoms



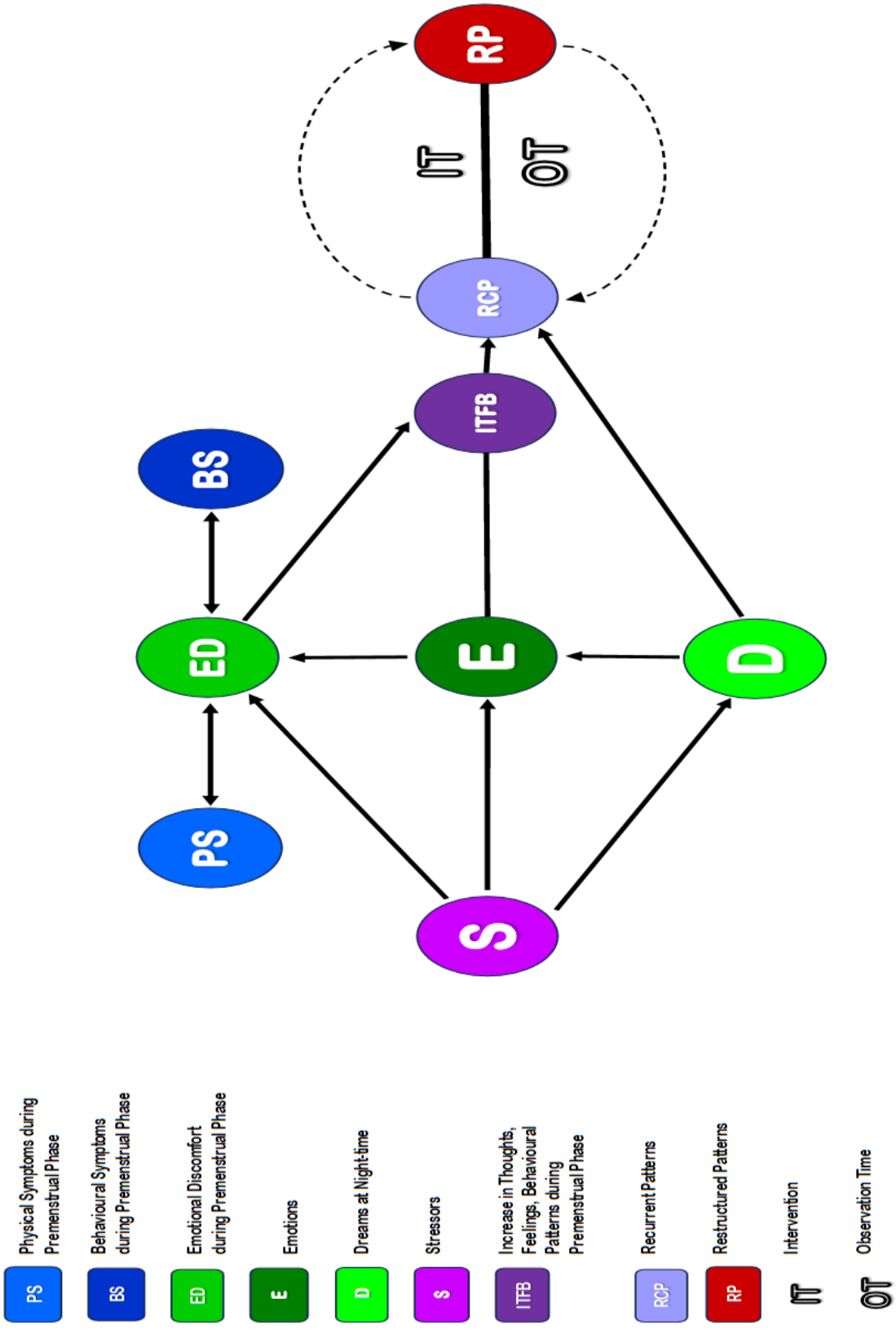
Source: Authors' Contribution: Correlates between Premenstrual Symptoms and Quality of Life among Women Academicians – A Biopsychosocial Approach. *Health and Population: Perspectives and Issues*, Vol. 46, No. 4, pp. 204-214, Oct-Dec 2023.

Since positive emotions serve as motivation to explore new avenues of self-rehabilitation, the proposed biopsychosocial approach can be utilized for intervention at the psychological level including awareness of ‘self’, therapeutic techniques for handling emotions in a positive way by reframing the mind to approach things from a different perspective as well as other customized rehabilitation procedures to bring in desired biological changes, thereby alleviating the premenstrual symptoms.

6.3 Self-Assessment Measure

Every individual has potential to think, analyze and explore for betterment of ‘self’. In the context of assessing premenstrual symptoms, each and every individual has a different set of symptoms with varying intensity. One’s own personality characteristics, coping-up with life’s situations and handling the stressors makes a unique combination for each person in analyzing the ‘self’ and exploring new avenues for reducing the symptoms during the luteal phase. Based on the results and observations the following Self-Assessment Measure (SAM) is suggested for identifying the emotional symptoms during the luteal phase and alleviating through self-rehabilitation methods as given in Fig. 3.

Fig.3 Self-Assessment Measure for Premenstrual Symptoms



6.3.1 Steps for Self-Assessment:

1. Identify the Stressor(s) that triggers the emotions.
2. Bring to awareness about the thoughts, feelings and behavioural patterns when stressed.
3. Identify any recurrent negative patterns of thoughts, feelings and behaviour during the premenstrual phase.
4. List out the pattern(s) you desire to change.
5. Apply restructuring patterns including affirmations, deep breathing, visualization and imagery techniques, meditation, music therapy, art therapy, etc.
6. Include choice of various self-rehabilitation measures such as mind-based therapies, talk therapy, other assisted therapy facilitation, physical exercises, etc.
7. Identify if any recurrent patterns of dreams at night with negative emotions and relate it to ongoing daily stressor, short-term or unresolved stressors in your life and repeat Step 5 and Step 6.
8. The suggested observation time is 3 to 6 months to identify the recurrent negative patterns and apply restructuring patterns.
9. Observe for changes in the emotional symptoms during the premenstrual phase.
10. Observe for changes in the behavioural and physical symptoms during the premenstrual phase and include new self-rehabilitation measures if necessary.

7. Conclusion

The study highlighted both positive and negative correlations exist amongst the socio-demographic, health, premenstrual, psychosocial and premenstrual symptom remedial variables that has an impact on quality of life of women academicians. However, the emotional discomfort experienced during the premenstrual phase affects their life satisfaction and career growth levels. This research study showed that premenstrual symptoms affect women of different age-groups and the way of reducing them is possible by approaching through a psychosocial perspective. This paves way for projecting the comprehensive framework and it is based on the pertinent data that are responded in the context of premenstrual symptoms by the women faculties at selective colleges taken in this research. The framework attributes to various facets to understand the symptoms among the respondents in a better way. This aforesaid framework has been instrumental for suggesting the biopsychosocial approach, which included the social factors, psychological disruption and biological impact, wherein the proposed intervention at the psychological level will have its effect. This followed by self-

assessment measure will facilitate handling the premenstrual symptoms by women themselves by understanding and managing various stressors, adopting coping styles, thereby alleviating it and enhancing their work-life balance. Keeping in view the phenomenal contributions of academicians to future generations, recommendations for the policy makers, governmental and institutional governing bodies include devising orientation and awareness programs for the faculties focusing on the importance of premenstrual wellness and its impact on psychological well-being, wherein its contribution to their quality of life is significant.

8. Papers Published

8.1 UGC CARE 1 Journal Publications:

1. Ramya, K. & Manimozhi, K. (2023). Correlates between Premenstrual Symptoms and Quality of Life among Women Academicians – A Biopsychosocial Approach. *Health and Population: Perspectives and Issues*, 46(4), 204-214.

2. Ramya, K. & Manimozhi, K. (2024). Contributors to Psychosocial Well-Being of Women Academicians at Higher Educational Institutions. *The Indian Journal of Home Science*, 36(1), 196-204.

8.2 Peer-Reviewed Journal Publications:

1. Ramya, K. & Manimozhi, K. (2023). Predictors of Emotional Wellness among Women Faculties – A Psychosocial Perspective. *Technology-Information-Management-Entrepreneurship – Review (TIMER)*, 1(1), 41-50.

2. Ramya, K. & Manimozhi, K. (2023). A Study on Relationship between Premenstrual Symptoms and Work-Life Balance among Women Academicians. *Research Highlights, Journal of the Avinashilingam Deemed University (JADU)*, 33(4), 248-254.

8.3 Edited Book Publications:

1. Ramya, K. & Manimozhi, K. (2020). Premenstrual Syndrome: A Psychological Overview and Self-Intervention, Edited Book, Women: Struggle, Survival & Success, Bonfring Publications, Coimbatore, India.

2. Ramya, K. & Manimozhi, K. (2020). Belief System & Mind Patterns: Conceptual Overview of Impact on Women's Reproductive Health, Edited Book, Holistic Research Perspectives Vol.5, Centivens Publications, Coimbatore, India.

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